

AMENDMENTS TO THE CLAIMS

1. (Original) A method of self-scheduling appointments between service recipients and service providers via an electronic network, the method comprising the steps of:

receiving via the electronic network an appointment scheduling request from a service recipient;

determining an authorization of the service recipient to submit the appointment scheduling request;

identifying a pre-authorized scheduling ticket for the service recipient, the pre-authorized scheduling ticket including appointment scheduling information;

providing to the service recipient an appointment proposal in accordance with the appointment scheduling information; and

applying a set of rules to the appointment request to determine if the requested appointment is allowed.

2. (Original) The method of claim 1, wherein the set of rules comprises a rule selected from the group of rules including: type of patient, patient insurance, referral, provider preference, past patient history and copay requirements.

3. (Original) The method of claim 1, wherein the set of rules comprises a hierarchy of rules.

4. (Currently amended) The method of claim 3, wherein the hierarchy is at least one of the following ~~comprises a hierarchy selected from the group of hierarchical levels including:~~ system, [[or]] facility, department, provider, or ~~[[and]]~~ rule.

5. (Original) The method of claim 1, wherein the set of rules is predetermined.

6. The method of claim 1, wherein a rule of the set of rules is dynamic.
7. (Original) The method of claim 1, wherein the step of determining an authorization of the service recipient includes authorizing a user initiated scheduling process when a scheduling ticket is not located.
8. (Original) The method of claim 7, further comprising the step of applying a more restricted set of rules when an appointment is scheduled through the user initiated scheduling process.
9. (Original) The method of claim 1, further comprising the step of verifying the pre-authorization scheduling ticket.
10. (Original) The method of claim 9, wherein the step of verifying the pre-authorization scheduling ticket comprises checking at least one of the group of checks including: availability of self-scheduling for the service recipient, validity of the pre-authorized scheduling ticket, and availability of requested appointment slots.
11. (Original) The method of claim 1, wherein the step of identifying a pre-authorized scheduling ticket for the service recipient comprises receiving the appointment scheduling information from the service provider.

Claims 12-23 (Canceled)

24. (Original) Within an enterprise healthcare information management system, the healthcare information management system including a patient health record server including a patient health record database and an enterprise information server including an enterprise information database, the enterprise healthcare information management system being securely coupled to an electronic network for permitting access to the enterprise healthcare information management system by patients, a system for self-scheduling appointments by patients comprising:

a self-scheduling server coupled to the patient health record server, the enterprise information server and to the electronic network for secure communications therewith, the self-scheduling server adapted to receive appointment scheduling requests from patients via the electronic network;

a processor within the self-scheduling server, the processor including a rule base; and wherein the processor is operable upon the appointment scheduling requests to authorize the appointment scheduling request, to send appointment schedule information to the enterprise healthcare information management system for inclusion in the enterprise information database and to the patient health record server for inclusion in the patient health record database, and to send an appointment acknowledgment to the patient via the electronic network.

25. (Original) The system of claim 24, wherein pre-authorization scheduling information associated with the patient is stored in at least one of the enterprise information database and the patient health record database.

26. (Original) The system of claim 25, wherein the pre-authorization scheduling information comprises a pre-authorized scheduling ticket.

27. (Original) The system of claim 26, wherein the pre-authorization scheduling ticket is automatically generated by the enterprise healthcare information management system.

28. (Original) The system of claim 24, wherein the appointment scheduling requests are manually generated by the patient through a user initiated scheduling process, and communicated to the system via the electronic network.

29. (Original) The system of claim 24, wherein the rule base contains a set of rules.

30. (Original) The system of claim 29, wherein the set of rules comprises the group of rules including: type of patient, patient insurance, referral, provider preference, past patient history and copay requirements.
31. (Original) The system of claim 29, wherein the set of rules comprises a hierarchy of rules.
32. (Original) The system of claim 31, wherein the hierarchy of rules comprises the group of hierarchical levels including: system or facility, department, provider and rule.
33. (Original) The system of claim 24, wherein the set of rules is predetermined.
34. (Original) The system of claim 24, wherein a rule of the set of rules is dynamic.